Title:
Active Teaching Strategies for a Sense of Salience: End-of-Life Communication

Mary Louisa Kopp
School of Nursing, Concordia University Wisconsin, Mequon, WI, USA

Session Title:
End-of-Life
Slot:
1C: Friday, April 4, 2014: 10:15 AM-11:30 AM
Scheduled Time:
10:15 AM

Keywords:
Active Teaching Strategies, Communication and End-of-Life

References:

Learning Activity:

<table>
<thead>
<tr>
<th>LEARNING OBJECTIVES</th>
<th>EXPANDED CONTENT OUTLINE</th>
<th>TIME ALLOTTED</th>
<th>FACULTY/SP TEACHER</th>
<th>TEACHING/LEARNING METHOD</th>
<th>EVALUATION/FEEDBACK</th>
</tr>
</thead>
<tbody>
<tr>
<td>Example</td>
<td>Example Definitions of &quot;curriculum&quot;</td>
<td>Example 20 minutes</td>
<td>Example Name, Credentials</td>
<td>Example Lecture PowerPoint presentation Participant feedback</td>
<td>Example Group discussion: What does cultural training mean to you?</td>
</tr>
<tr>
<td>Compare significant learning, active teaching, and traditional passive lecture</td>
<td>Definitions: traditional passive lecture, active learning/teaching &amp; significant learning according to Fink (2013). Relate Fink (2013) active teaching to Blooms taxonomy, Decreases the paradigm shift in the classroom, alignment with clinical practice.</td>
<td>15 minutes</td>
<td>Dr. Mary Lou Kopp, PhD, MSN, RN, CHPN, CNE</td>
<td>Pre-assessment discussion. Lecture PowerPoint presentation. Participation feedback</td>
<td>Group discussion: Comparison of pre-assessment discussion, importance of significant learning for a sense of salience.</td>
</tr>
<tr>
<td>Recognize the importance of teaching</td>
<td>Problems with passive lecture: producing a passive environment</td>
<td>15 minutes</td>
<td>Dr. Mary Lou Kopp, PhD, MSN, RN, CHPN, CNE</td>
<td>Lecture PowerPoint presentation. Provide examples of each: Cognitive, affective, psychomotor, and personal.</td>
<td>Discuss challenges and importance of teaching end-of-life communication, and...</td>
</tr>
<tr>
<td>End-of-Life communication skills with a sense of salience</td>
<td>sense of salience; difficulty nature of teaching end-of-life communication. Foundation to excellent nursing care at end-of-life.</td>
<td>(written exam), affective (journaling, self-assessment, surveys) and psychomotor assessment (simulation): including simulation video. Participation feedback</td>
<td>assessing all 3 learning domains</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Abstract Text:**

The problem addressed was twofold: First, passive lecture prevents transfer to situational decision-making, or a sense of salience (Benner, Sutphen, Leonard, & Day, 2010). Nursing education pedagogy is in need of revision. Many nurse educators teach from tacit, or experience in how they were originally taught. Nurse educators must prioritize utilization of educational science. Active teaching models are meant to encourage a sense of salience by integrating theory and practice (Benner et al., 2010). However, the inconsistent nature of active learning definitions prevents generalization of research findings. Fink (2013) provided a structured definition for active teaching strategies that compliments learning domains created by Bloom, Englehart, Furst, Hill, and Krathwohl (1956). Second, death discussions are more complicated than standard communication courses teach. The COMFORT model (Wittenberg-Lyles, Goldsmith, Ferrell, & Ragan, 2013), was validated for nursing education.

This study compared active teaching strategies with passive lecture by evaluating cognitive, affective, and psychomotor learning outcomes, while highlighting the need for end-of-life communication in nursing education. The design was comparative, quasi-experimental, and posttest-only with control. Instruments included a multiple-choice test (Malloy, Virani, Kelly, & Munevar, 2010), a survey measuring openness toward end-of-life communication (Questionnaire for Understanding the Dying Person and His/Her Family, Yeaworth, Kapp, & Winget, 1974), and an observational checklist called the Simulated Client End-of-Life Communication Scale (SCEOLCS), revised from the Simulated Client Interview Rating Scale (Arthur, 1999). Significant psychomotor differences were revealed ($t(46) = -5.65$, $p<.001$). The SCEOLCS demonstrated internal consistency ($a = .902$). Active teaching strategies improved the nursing student’s sense of salience during end-of-life communication. Ultimately, nursing students were better prepared for one of their most underestimated and rewarding roles, caring for dying patients and their families.